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FEC FORM 1		STATEMEN ORGANIZA			fice Use Only
1. NAME OF COMMITTEE (ir	n full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Campaign	for Ch	ange			1
<u> </u>					
ADDRESS (number a	nd street)	1147 Hancock St Suite 212			
(Check if ac	ddress				
is changed)		Quincy		MA 021	69
			CITY	STATE	ZIP CODE
X (Check if is change	address d)	S (Please provide only one e- info@campaignforchange.c			
COMMITTEE'S WEB	PAGE ADD	RESS (URL)			1
(Check if is change					
2. DATE 12	2 01	2011			
3. FEC IDENTIFIC	CATION NU	MBER C CC	0441501		
4. IS THIS STATE!	MENT	NEW (N) OR	X AMENDED (A)		
I certify that I have e	examined thi	s Statement and to the best	of my knowledge and belief in	t is true, correct and	complete.
Type or Print Name	of Treasurer	Thomas R. Kiley			
Signature of Treasure	Thomas	R. Kiley	[Electronically Filed]	Date 12	01 2011
NOTE: Submission of			may subject the person signing ON SHOULD BE REPORTED W		penalties of 2 U.S.C. §437g.
Office			For further information of	contact:	

1.	Office		For further information contact: Federal Election Commission	FEC FORM 1
Use Only			Toll Free 800-424-9530 Local 202-694-1100	(Revised 02/2009)